

59th ANNUAL DIAGNOSTIC SLIDE SESSION 2018.

CASE 2018-7

Submitted by:

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Clinical History: The decedent is a 50 year old female who presented with hemiparesis, expressive dysphasia, headaches, visual disturbances, and paresthesias. Imaging showed multifocal frontal and temporal lesions crossing the corpus callosum. A frontal lobe biopsy at this time demonstrated only reactive gliosis and perivascular inflammation. Several months later, she presented to the emergency department with acute worsening of symptoms. Repeat imaging showed findings consistent with an ischemic stroke. Serologic workups for autoimmune disease and infection were negative. She was discharged, and her neurologic condition worsened over the course of a year. She passed way after an acute deterioration in neurologic status.

Autopsy findings: Gross autopsy findings included multiple areas of softened parenchyma in the left frontal, right fronto-parietal, right superior parietal, left mid parietal, and left occipital lobes. The lumina of the carotid arteries were grossly narrowed (approximately 0.1 cm in diameter).

Material submitted:

1. MRI images
2. Gross photographs of cortex and base of brain
3. H&E stained slide of cortical lesion
4. Trichrome stained slide of carotid artery

Points for discussion:

1. Explain the differential diagnosis of this clinical history and workup
2. Understand the classification and subtyping for this disease